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ABSTRACT

Provided in this report are data on school-age child care in Virginia and Minnesota for the 1981-82 school year. Minnesota and Virginia were selected for study because of the prevalence of programs for school-age children, the rural/suburban/urban contrasts that could be made, the female labor force participation rates, and the adequate numbers and other population demographics of families with school-age children. Specific objectives of the study were to (1) describe the child care use patterns among families with varying demographic characteristics and with children of various ages; (2) explore parental satisfaction with current care; (3) describe how families find and select care; (4) explore the circumstances of and attitudes toward self- and sibling care; and (5) describe the community context for school-age care and explore ways in which communities meet their child care needs. Data were collected in the following ways: computer-assisted telephone interviews with a random sample of almost 1,000 households having school-age children; face-to-face discussions with parents, children, day care providers, and state and local officials; and group discussions with parents. Findings, based primarily on results of the telephone survey, indicate overall similarities between the two states. Additional findings are summarily discussed. (RH)

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School-Age Day Care Study

EXECUTIVE SUMMARY

March 15, 1983

Pursuant to:
Contract No. 105-81-C-011

Prepared for:

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PREFACE

The Administration for Children, Youth and Families is pleased to have sponsored this study of school-age day care in Minnesota and Virginia.

Demographic changes and dramatic increases in labor force participation of women have increased the demand for child care. The needs of the more than 25 million school-age children are the focus of heightened parental and public concern. This study highlights information based on the actual experience of parents in two States. These insights have nationwide relevance. The School-Age Day Care Study represents the first large scale research effort to address the specific needs, circumstances and day care alternatives for families with school-age children.

Study findings could prove of value to parent groups, child care practitioners, school officials, state and local government officials, church groups, business executives interested in employer supported day care, and child care advocates.

Raymond C. Collins

Raymond C. Collins, Ph.D.
Director
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March 11, 1983

ACKNOWLEDGEMENTS

Applied Management Sciences and the staff of the School-Age Day Care Study express appreciation to a number of individuals who made significant contributions to the study and the report. First and foremost we are grateful to Patricia Divine-Hawkins of the Office of Human Development Services, Administration for Children, Youth and Families. Ms. Hawkins spent countless hours with the staff as we tackled the problems of conceptualizing and operationalizing the variables that relate to how families make decisions for the care of their school-age children. Ms. Hawkins was also instrumental in transforming the draft report into a final report that we could be proud of. We are also grateful to the following individuals who served as the project's Advisory Panel:

Michelle Seltzer, Wellesley College
Gwen Morgan, Wheelock College
Thomas Long, Catholic University of America
Jim Levine, Bank Street College
Elizabeth Prescott, Pacific Oaks College

These Advisory Panelists shared their years of research experience in day care issues and helped sharpen the focus of the study.

We also thank Raymond Collins, Director of the Office of Program Development, for his support and guidance. Dr. Collins was especially helpful in providing an overall policy perspective as we approached the final stages of our research.

Finally, we acknowledge the respondents to the surveys in Virginia and Wisconsin. The project staff interviewed numerous day care providers, employers and business people and state government staff involved with day care issues. Most importantly, we thank more than 1,000 parents who responded to the survey and willingly shared their thoughts and concerns about care for school-age children.

JoAnn Kuchak
Vice President
March 15, 1983

SCHOOL-AGE DAY CARE STUDY

March 15, 1983

EXECUTIVE SUMMARY

Introduction

The School Age Day Care Study was a statewide survey of child care arrangements among families in Minnesota and Virginia with children aged 5-14. Sponsored by the Administration for Children, Youth and Families, Office of Program Development, in Washington, D.C., the research was carried out under Contract 105-81-C-011 by Applied Management Sciences of Silver Spring, Maryland, along with a subcontractor, Chilton Research Services in Radnor, Pennsylvania.

Originally funded as a national child care survey of families with school-age children, the study was later limited to two states in order to provide detailed and generalizable information at the state level. The purpose of that modification was to increase the utility of this research for states, which have the primary responsibility for child care, by developing sufficient data for a comprehensive analysis of child care usage patterns throughout the state. The survey was thus designed to provide state policy makers and program developers with consumer profiles for urban, suburban and rural residents of various demographic characteristics with children of all ages from 5 to 14. In addition, the study provides a replicable methodology which can be used by other states to assess their own school-age child care populations, usage patterns and needs.

Context for School-Age Child Care

Over the past several decades, demographic, economic and attitudinal changes in American Society have created an unprecedented demand for child care as well as a shift in the preexisting configurations of supply and demand in the child care market. Increased labor force participation of mothers resulting from economic pressures on two parent families, growth in the number of single parents, changing attitudes about career and family roles for women, and the decline of extended families has in turn created a disruption in many sources of child care supply, notably those arrangements involving friends, relatives and neighbors. These traditional care providers are now less available in many American communities as women who might once have stayed at home to care for their own or another's child are themselves seeking child care arrangements.

Between 1958 and 1977, the children of full-time working mothers who were cared for in their own homes, either by a relative or non-relative, declined from 57% to 29% with the largest portion of that decrease centered in relative care (16%). During that same period, family day care, or care in the home of the provider, increased substantially from 27% to 46%. The proportion of children in day care centers likewise increased from 5% to nearly 15%. Children under six who cared for themselves reportedly declined (from 0.6% to 0.3%) during that period as did the number of children cared for by their mothers at work, which in 1958 totaled over 11% but had declined to about 8% by 1977. These figures refer strictly to preschool children but provide much of the context for school-age care since these children have either reached school age or will in 1983.

In addition to the large numbers of school-age children who are currently in some form of child care, projections indicate that this population is likely to increase in the future. The rapid increase in labor force participation of women has most dramatically affected the child care market for infants and toddlers since their mothers represent the fastest growing segment of the labor force. These children will reach school age during the Eighties, thereby increasing the proportion of children needing care during non-school hours while their parents

work. Other mothers will continue to enter the labor force once their children reach school age, a trend which has been well established over the past two decades. In addition, the United States is experiencing an increase in birth rates for the first time in many years. Many of the babies have already been born who will need child care throughout the Eighties and beyond. By 1990, children under six who need child care while their mothers work will have increased from a 1982 level of about 8.5 million to over 10 million. This will translate into increased demand for school-age child care into the next century.

Although school-age children constitute a sizable child care population which will increase in the coming years, the day care field in the past two decades has focused on younger children with respect to day care research, program development and policy. At the same time there is growing recognition that school-age children have different developmental needs and require different types of programs than do younger children. A difficult challenge for the child care field lies in the development of programs which are structured enough to provide consistency and good supervision, yet which recognize the child's growing need for independence and which appeal to children of diverse interests and developmental levels.

The lack of sound information about appropriate and acceptable community-based alternatives for school-age children is reflected in the large number of households which appear to have no supervision for their children during non-school hours. The U.S. Bureau of the Census, for example, estimates that approximately 2 million children between the ages of 7 and 13 are routinely without adult supervision for some portion of the day. These children have become an increasing locus of concern for parents, educators, child development specialists, program planners and policy makers. Yet little has been known about the reasons families select self-care for their children, the perceived options available to these families, or the experienced advantages and liabilities of such arrangements.

Objectives of the Study

The primary goal of this research was to provide detailed and comprehensive profiles of child care practices, needs and barriers among families with children aged 5 14 in Minnesota and Virginia.

Specific objectives of the study were:

- To describe the child care usage patterns among families of varying demographic characteristics with children of various ages;
- To explore parental satisfaction with current care;
- To describe how families find and select their care arrangements;
- To explore the circumstances of and attitudes toward self-care and sibling care; and
- To describe the community context for school-age care and explore ways in which communities meet their child care needs.

Methodology

This study provides data on school-age child care for the 1981-82 school year for two states, Virginia and Minnesota. Several types of data collection techniques were employed, including:

- computer-assisted telephone interviews with a random sample of almost 1,000 households with school-aged children (5-14), 500 in each of the two states;
- in-person discussions with a subsample of 60 parents who responded to the telephone interview, and their school-age children, as well as providers of day care services, and state and local officials involved in day care; and
- two focus group discussions with parents of school-age children.

Minnesota and Virginia were selected as the two study states primarily because of their prevalence of programs for school-age children, the rural-suburban-urban contrasts that could be made, their female labor force participation rates, and the adequate numbers of families with school-age children in both states as well as other population demographics.

In comparison with the national average at the time the study was conducted, Minnesota's unemployment rate was relatively low; it had high family buying power, a small minority population, and a low incidence of poverty. The proportion of the school-age population in Minnesota was relatively high, its female employment rate was average and it had a moderate metropolitan population. Minnesota is a rather typical growth state.

Virginia is part of the rapidly-growing sunbelt, yet, as part of the South, it is in the poorest region of the country. Unemployment was relatively low and both family buying power and the poverty rate were moderate. The profile of Virginia included an average female labor force participation rate, an average proportion of school-age children in the population and a moderate metropolitan population. There was a higher proportion of Blacks in Virginia than in Minnesota.

Within both states there were progressive policies and practices toward school-age child care. For example, a number of local governments in both states were active in providing programs for school-age children. Both states had before-and-after school programs in the public schools.

Summary of Findings

The findings presented below are based primarily on the results of the telephone survey; viewpoints of parents, children, and providers obtained through in-person interviews are interspersed throughout this summary to aid in interpretation of certain findings. Overall, the pattern of findings is similar in Virginia and Minnesota.

What Types of Arrangements Do Parents Make for Their School-Age Children?

- Families used a wide variety of care arrangements for their school-age children. The types of care most frequently used were different for younger than for older school-age children.

- Most families reported their before-school care arrangements were satisfactory. However, only two-thirds of the working parents regularly (i.e., daily) cared for their children in the morning, while almost all families with at least one parent not working full-time did so.
- After-school arrangements posed greater concern for most families, but particularly for families with parents working full-time. Only about a third of such families reported that they regularly cared for their school-age children; even in households with at least one parent not working full-time, only 3 in 5 parents reported providing care for their school-age children in the afternoon.
- School-age children in families with all adults working regularly cared for themselves considerably more often than children in families with an adult who is not working. Approximately one fourth of the school-age children of working parents in both states cared for themselves on a regular basis as opposed to 2 and 5 percent (in Virginia and Minnesota, respectively) of the school-age children in families with one adult not working.

Overall Usage Patterns

The school-age care patterns of working parents are different from families with a nonworking parent. This contrast is presented in Exhibit A for both Minnesota and Virginia. This study attempted to present a comprehensive picture of all families' usage of day care for their school-age children. Such a perspective included all time periods outside of school and all parent and nonparent care arrangements.

Two-thirds of families with full-time working parents used nonparent care on a regular basis (V-69%; M-65%), and another 10 percent used such care on an occasional basis.* Families with a nonworking parent used nonparent care less frequently on a daily basis (V-21%; M-15%) but more often on an occasional basis (V-16%; M-30%).

Combining both types of families, it is clear that most parents provided at least some of the weekday care for school-age children outside of school hours. (Exhibit B shows the types of child care used regularly by families in each state.) Parent care was used regularly by 88 percent of the families interviewed in Virginia and for 92 percent in Minnesota.

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*V = Virginia; M = Minnesota

EXHIBIT A: SCHOOL-AGE CARE ARRANGEMENTS OF HOUSEHOLDS BY ADULT EMPLOYMENT STATUS: MINNESOTA 1/

	Parents Not Working Full-time (Percent of Row)			Full-time Working (Percent of Row)			All Households (Percent of Row)		
	Not Used	Less than 5 times	5 times	Not Used	Less than 5 times	5 times	Not Used	Less than 5 times	5 times
AM									
Parent	2	-	98	32	2	66	10	1	89
Nonparent Care	98	-	2	65	2	33	89	1	10
Relative In-Home	100	-	-	93	1	6	98	-	2
Nonrelative In-Home	100	-	-	98	-	2	99	-	1
Self/Sibling Care	98	-	2	84	-	16	95	-	5
At Relative's Home	100	-	-	97	1	2	99	-	-
At Nonrelative's Home	100	-	-	94	-	6	98	-	2
Center	100	-	-	97	-	3	99	-	1
School-Based Program	100	-	-	100	-	-	100	-	-
Other Activities	100	-	-	100	-	-	100	-	-
Other	100	-	-	100	-	-	100	-	-
PM									
Parent	10	20	70	55	11	34	22	18	60
Nonparent Care	56	30	14	29	14	57	49	25	26
Relative In-Home	99	-	1	90	4	6	96	1	2
Nonrelative In-Home	99	1	1	96	3	2	98	1	1
Self/Sibling Care	95	2	4	77	5	19	90	2	8
At Relative's Home	98	2	-	96	1	3	97	2	1
At Nonrelative's Home	94	5	1	83	5	11	91	5	3
Center	99	1	-	96	-	4	98	-	1
School-Based Program	73	22	5	79	14	7	75	20	5
Other Activities	89	10	1	85	13	2	88	11	1
Other	97	2	1	98	1	2	97	2	1
Weekday									
Parent	1	-	99	24	4	72	7	1	92
Nonparent Care	56	30	15	25	10	65	47	24	29
Relative In-Home	99	-	1	84	4	12	95	1	4
Nonrelative In-Home	99	1	1	94	2	4	97	1	1
Self/Sibling Care	94	1	5	69	4	27	87	2	11
At Relative's Home	98	2	-	95	1	3	97	2	1
At Nonrelative's Home	94	5	1	82	4	13	91	5	4
Center	99	1	-	96	-	4	98	-	1
School-Based Program	73	22	5	79	14	7	75	20	5
Other Activities	89	10	1	85	13	2	88	11	1
Other	97	2	1	98	1	2	97	2	1

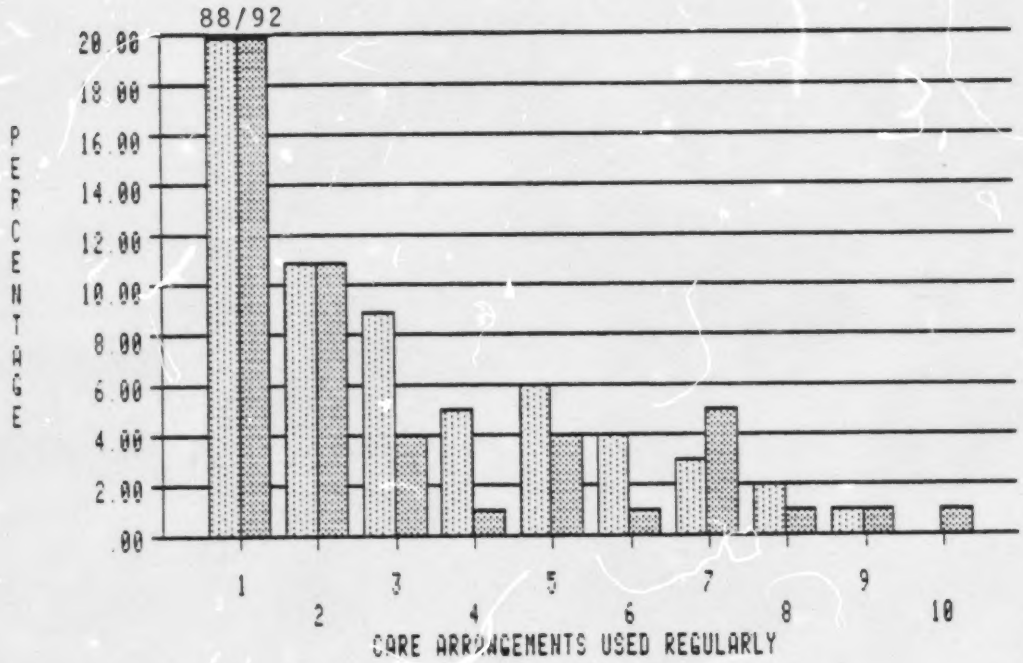
1/Households which used different care arrangements for their children appear in this table more than once.

EXHIBIT A[illegible]t'd SCHOOL AGE [illegible] ARR[illegible]HEN[illegible] OF HOUSEHOLDS [illegible] ADULT EMPLOYMENT STATUS: VIRGINIA 1/

	Parents Not Working Full-time (Percent of Row)			Full-time Working (Percent of Row)			All Households (Percent of Row)		
	Not Used	Less than 5 times	5 times	Not Used	Less than 5 times	5 times	Not Used	Less than 5 times	5 times
AM									
Parent	4	-	96	30	2	67	14	1	85
Nonparent Care	96	-	4	67	3	30	85	1	14
Relative In-Home	98	-	2	92	-	8	96	-	4
Nonrelative In-Home	100	-	-	98	-	2	99	-	1
Self/Sibling Care	99	-	1	85	3	13	94	1	5
At Relative's Home	99	-	1	96	-	4	98	-	2
At Nonrelative's Home	100	-	-	95	-	5	98	-	2
Center	100	-	-	99	-	1	100	-	-
School-Based Program	100	-	-	100	-	-	100	-	-
Other Activities	100	-	-	100	-	-	100	-	-
Other	100	-	-	100	-	-	100	-	-
PM									
Parent	18	12	70	61	8	31	35	10	55
Nonparent Care	62	17	21	29	9	62	49	14	36
Relative In-Home	95	-	5	85	3	12	91	1	8
Nonrelative In-Home	99	1	-	97	-	3	98	-	1
Self/Sibling Care	98	1	1	76	3	20	90	2	9
At Relative's Home	98	-	2	90	3	7	95	1	4
At Nonrelative's Home	96	2	3	88	2	10	93	2	5
Center	100	-	-	97	1	3	99	-	1
School-Based Program	85	13	3	87	9	4	86	11	3
Other Activities	84	10	6	91	7	2	86	9	4
Other	97	3	-	99	-	1	98	2	-
Weekday									
Parent	3	1	96	23	2	75	11	1	88
Nonparent Care	62	16	21	22	9	69	47	14	40
Relative In-Home	95	-	5	82	1	16	90	1	9
Nonrelative In-Home	99	1	-	96	-	4	98	-	2
Self/Sibling Care	98	-	2	69	6	25	87	3	11
At Relative's Home	97	-	3	88	2	10	94	1	5
At Nonrelative's Home	96	2	3	86	2	12	92	2	6
Center	100	-	-	97	1	3	99	-	1
School-Based Program	85	13	3	87	9	4	86	11	3
Other Activities	84	10	6	91	7	2	86	9	4
Other	97	3	-	99	-	1	98	2	-

1/Households which used different care arrangements for their children appear in this table more than once.

EXHIBIT B: CARE ARRANGEMENTS USED REGULARLY



Key:
- MN HSHLDS
- VA HSHLDS

1 Parent
2 Self/Sibling Care
3 Relative In-Home
4 At Relative's Home
5 At Non Relative's Home
6 Other Activities
7 School-Based Program
8 Non-Relative In-Home
9 Center
10 Other

Overall, the second most frequently used arrangement for school-age children was self-care or care by a sibling who was under age 14 (V-11%; M-11%). Families with full-time working parents used this arrangement much more frequently, however (M-27%; V-25%). School-based programs accounted for no more than 5 percent of the care arrangements used regularly in both states. Care provided by relatives in the home occurred more frequently in Virginia, which may be related to the larger proportion of minorities (many of whom used this mode of care) in that state.

Care Arrangements by Age of Child

Younger children, ages 5 to 8, tended to be in self-care or sibling care much less frequently (V-3%; M-4%) than older children, ages 12 to 14 (V-22%; M-15%). See Exhibit C for the distribution of children by age in the various care arrangements.

The in-home interviews indicated that some parents who used arrangements other than parent or self-care on a regular basis also occasionally used self-care. Parents said they were more likely to try self-care gradually, that is, leave a child for a short period of time on an occasional basis and incrementally increase the duration and frequency of self-care. Younger children tended to have care arrangements in a nonrelative's or relative's home or in a center more often than older children. Participation in school-based programs increased markedly with age--in Virginia from 1 to 5 percent and in Minnesota from less than 1 percent to 10 percent.

Arrangements Made During Special Time Periods

Parents were asked if their work schedule required them to have special child care arrangements during other time periods, such as evenings, weekends, and holidays. No more than 16 percent of the families in either state used special care arrangements on these occasions. Parent care was the predominant arrangement, especially during child illness, followed by other types of in-home care.

EXHIBIT C: PERCENTAGE OF CHILDREN IN DIFFERENT CARE ARRANGEMENTS, BY AGE

Type of Care Arrangement	Percentage of Column 1/ AGE OF CHILD: VIRGINIA			Percentage of Column 1/ AGE OF CHILD: MINNESOTA		
	Age 5-8	Age 9-11	Age 12-14	Age 5-8	Age 9-11	Age 12-14
Parent	88	90	86	92	92	92
Relative In-Home	10	8	9	3	2	4
Nonrelative In-Home	2	1	2	3	1	2
Self/Sibling Care	3	7	22	4	11	15
At Relative Home	7	3	4	1	1	-
At Non-Relative Home	9	4	2	6	2	1
Center	2	-	-	2	-	-
School-Based Program	1	-	5	-	1	10
Other Activities	4	6	4	1	1	1
Other	-	-	-	1	1	1

1/ Percentages sum to more than 100 because multiple modes of care are used.

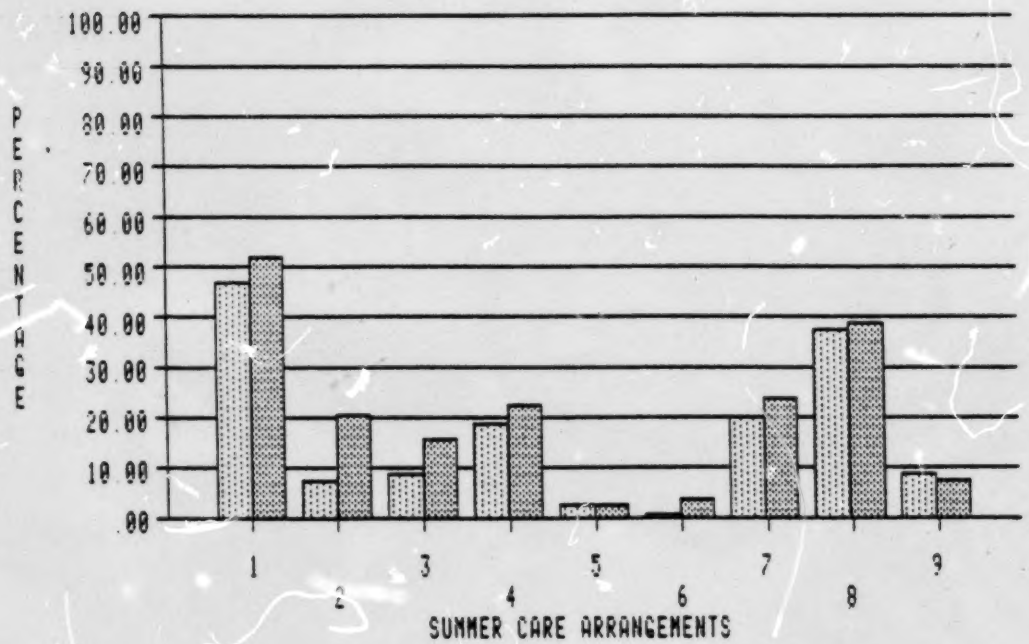
Summer Care Arrangements

Summers often pose child care problems for working parents. (Exhibit D shows a listing of the types of care arrangements parents were planning to use for the upcoming summer.) A large proportion of families did plan to use some type of arrangement other than parent care during summers. The most common summer arrangements were community recreation programs and facilities, camps, older siblings and neighbors, friends or relatives. In Minnesota, summer school and school activity programs afforded summer child care options for nearly one child in five.

Care Arrangements By Household Location

Families in rural areas in Virginia tended to have relatives care for their children more often than city dwellers or suburbanites. Self-care or sibling care, was proportionately most common in suburban areas in both states.

EXHIBIT D: SUMMER CARE ARRANGEMENTS (OTHER THAN PARENT AND SELF-CARE)



Key:
- MN HSHLDS
- VA HSHLDS

1 Community Recreation Program, Swimming Pool, or Supervised Playground
2 Summer School
3 School Activities Program
4 Summer Camp Program
5 Day Care Center
6 Family Day Care or Day Care Home (paid)
7 Older Brother or Sister (unpaid)
8 Neighbor, Friend, Relative (Other than sibling) (unpaid)
9 Other

Care Arrangements By Income Level

Several differences appeared in the types of care used by families with various levels of income. Those families in Virginia whose income was below the poverty cut-off were much more likely (17% vs 10%) to have children caring for themselves than were those in all other income brackets. In Minnesota, similar proportions of children in families below and above the poverty level were in self-care (11%). Care by relatives was also more frequently used by poor families in Virginia.

Cost of Care

The choice of care may be affected by the cost of the arrangement. See Exhibit E for the average weekly costs of all school-age child care for families classified by their predominate mode of care. Parents reported paying more for care in a nonrelative's home and in day care centers than for any other type of arrangement. Low-to-moderate costs were incurred for some families who used care by a relative in their home.

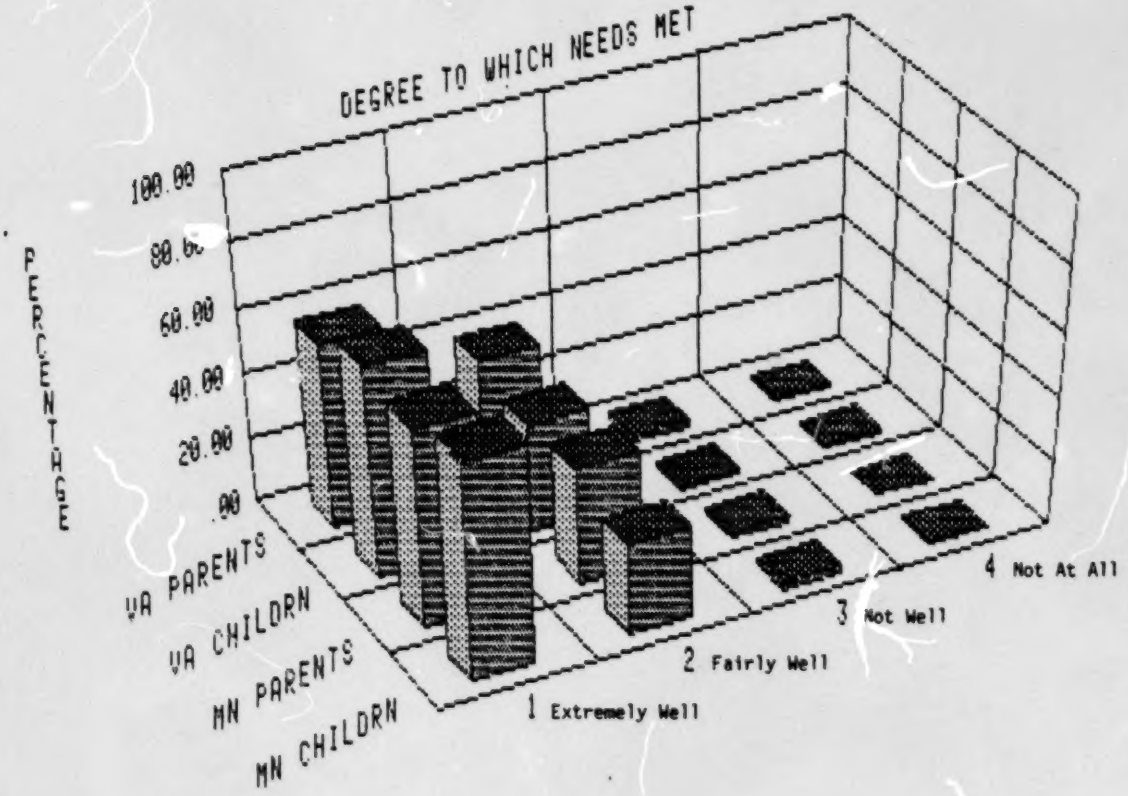
EXHIBIT E: COST OF CARE BY REGULAR CARE ARANGEMENTS (HOUSEHOLD)

	VIRGINIA							MINNESOTA						
	Average Weekly Cost of Care (% of Row)							Average Weekly Cost of Care (% of Row)						
Type of Care Arrangement	$1-10	$11-20	$21-30	$31-40	$41+	Don't Know/ No Cost	Total	$1-10	$11-20	$21-30	$31-40	$41+	Don't Know/ No Cost	Total
Parent	6	4	3	-	1	86	100	5	3	2	-	1	89	100
Relative In-Home	2	3	1	-	2	92	100	2	-	2	11	7	78	100
Non-Relative In-Home	16	21	9	-	16	38	100	15	36	14	10	5	20	100
Self/Sibling Care	8	3	-	1	4	84	100	3	3	2	1	1	90	100
At Relative Home	23	15	-	2	4	56	100	13	-	12	-	13	62	100
At Non-Relative Home	19	19	3	8	3	48	100	8	16	22	16	9	29	100
Center	9	37	28	-	9	17	100	-	12	48	6	35	-	100
School-Based Program	1	3	3	3	6	85	100	3	1	1	-	1	94	100
Other Activities	1	8	-	2	4	82	100	-	-	10	5	5	80	100
Other	-	-	-	-	-	100	100	-	-	-	-	7	93	100
Total	6	5	3	1	2	83	100	6	3	3	1	2	85	100

How Well Are Current Arrangements Meeting Parents' and Children's Needs?

- In both Minnesota and Virginia, the majority of parents said their needs were extremely well met by their current care arrangments. (See Exhibit F.)
- Almost three-quarters of the children in both states had parents who thought their own needs were met to the same extent as their children's.

EXHIBIT F: DEGREE TO WHICH PARENTS' AND CHILDREN'S NEEDS ARE MET



How Well Needs Are Met By Types of Care Used

More Minnesota parents using school-based programs said their needs were met extremely well than parents using any other arrangement, but a fair proportion (13%) said their needs were not well met. In Virginia, dissatisfaction was most often expressed with self- or sibling care (7%), with a 5 percent dissatisfaction rate in Minnesota. The arrangements best meeting children's needs in both states were activity programs and school-based programs. In Minnesota, parents' own care and care by a non-relative also rated highly. Fully 10 percent of the children in Virginia in self- or sibling care had parents who thought this arrangement did not meet their children's needs; only 3 percent of the Minnesota parents expressed dissatisfaction with this mode of care in meeting their children's needs. However, less than half of the children in self- and sibling care in both states had parents who reported their children's needs were extremely well met by this situation.

How Well Needs Are Met By Household Characteristics

Single-adult household heads had more difficulty with care arrangements than married adults. Fewer than 2 percent of the married respondents in Minnesota and 4 percent in Virginia indicated that their needs were not met, compared to 7 percent of the divorced or separated parents in each state. Widowed persons, in Virginia, reported the greatest problems meeting their needs for child care (11%).

Features of Care Arrangements That Parents Liked and Disliked

Parents using centers and school-based programs tended to be more specific about features they liked than those using other types of arrangements. Most often mentioned as positive features of center and school-based programs were educational activities, convenience, and parental involvement. Parents using in-home care often stated that their child was happy with the arrangement.

Few parents in either state cited features they disliked about their current care arrangements. The most commonly mentioned problems were not being home with the children and lack of supervision or

discipline. Only center users in either state mentioned cost as a problem with any frequency.

What Types of Care Arrangements Do Parents Prefer?

- Most parents did not express a preference for another care arrangement.
- Care by the mother was generally the choice among parents who had a preference for another type of care.

The high level of satisfaction that most parents reported with their current care arrangements seems to be substantiated by their lack of preferences for other arrangements and by the few parents (V-7%; M-3%) who indicated that they had tried to locate other arrangements within the past year.

The likelihood of having a preference for another mode of care was greatest for parents of children 5-to 8-years old, in Minnesota, and for 12-to-14 year-olds in Virginia. In both states, the preference for care by the mother increased with the age of the child.

How Do Parents Find and Select Their Care Arrangements?

- The most common source of information about child care arrangements in both states was a friend.
- A variety of information sources was used by families with all adults employed full-time and by families who had tried to locate other care arrangements.

Parents considered a variety of factors when selecting their child's care arrangements. The greatest concern was that their children be adequately supervised; 45 percent of the families in Virginia and 41 percent in Minnesota mentioned this consideration. Parents also reported that it was important that the caregiver's philosophy of child rearing be compatible with theirs (V-24%; M-19%). Parents considered certain child-related factors with some frequency: that the child liked the caregiver; that the child could be with his or her peers; that there were developmentally appropriate activities; that the child had freedom to do as she or he wanted; and that the child was safe and secure. The most important features of the child care facility mentioned by parents were convenience of location and hours of operation.

Parents interviewed in-person indicated a distinct preference for home-based arrangements, although these situations tended not to be as dependable as center care or school-based programs. The educational programs in centers were important to some parents; consideration of the child's health and security was also frequently mentioned. Parents participating in the in-home interviews were also asked to define quality child care. Their responses ranged from having a loving, firm caregiver, to having an appropriate age mix of children, stimulating activities, stability of care, and good supervision. These considerations seemed to be influenced by the type of care the child was receiving. Families using centers tended to consider the convenience of hours and location and the availability of developmental activities as most important. Parents using care in a nonrelative's home, however, considered the child's liking the caregiver above other factors.

Among those who cited barriers to locating other care arrangements, transportation problems were specifically mentioned by 22 percent of the Virginia families who had sought other care arrangements in the past year. Unavailability of acceptable care and cost were cited as barriers by 20 percent and 14 percent of such families, respectively. In Minnesota, transportation was reported as a barrier by only 2 percent of the families; unavailability of acceptable care and cost were each cited by 9 percent of the families who had sought care in the past year.

Although transportation was not a major problem for most parents, the importance of convenience, including minimal transportation difficulty, was often stressed. The lack of transportation problems was cited by both parents and providers as a major benefit of school-based programs.

How Are Parents and Children Coping With Self-Care?

- Approximately 11 percent of the school-age children of all families in both states regularly cared for themselves.
- A much higher proportion (V-25%; M-27%) of the families with all adults working full-time indicated that their school-age children regularly cared for themselves.

- About 40 percent of the parents whose children used self-care responded that their children began self-care between the ages of 8 and 10; another 40 percent responded that their children began self-care between the ages of 11 and 13. A few parents indicated this practice had begun before age 7.

One of the major issues in day care, particularly for school-age children, is self-care. This study examined when children began self-care, how well their arrangements were working, what the problems and benefits were, and the rules parents gave their children. Parents whose children were either occasionally or regularly in self-care were asked questions on these topics.

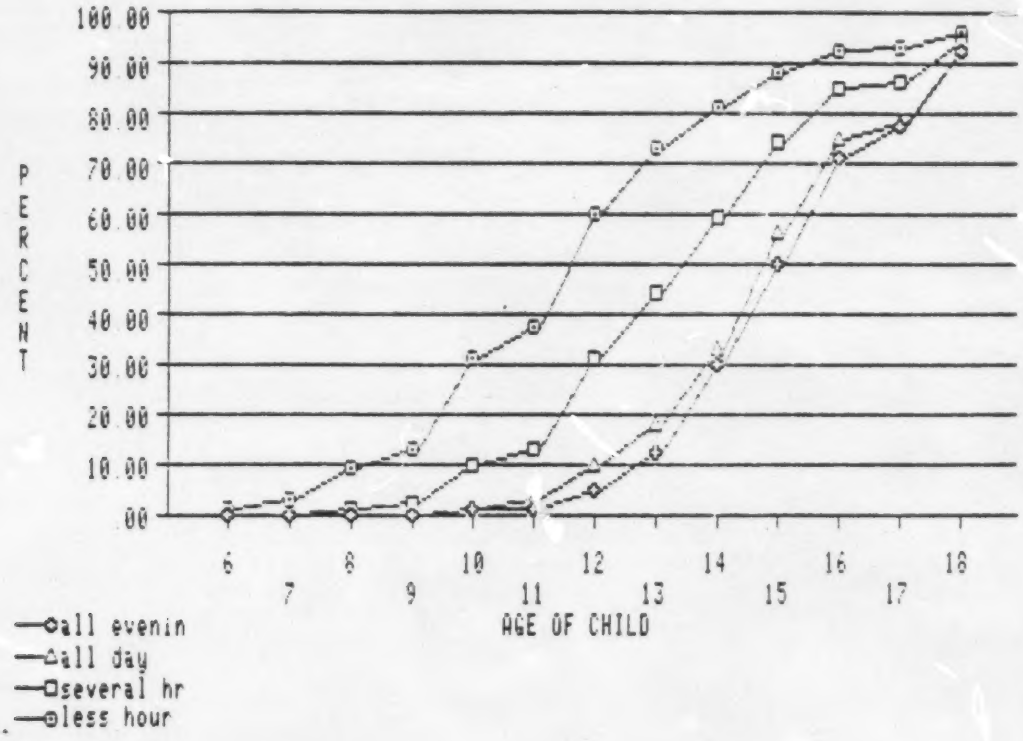
Parents generally responded that they would feel comfortable leaving a child at home without adult supervision at an older age than when children in the study sample actually began this practice. (See Exhibit G.) Children in self-care also reported that they would feel comfortable without adult supervision at a later age than when they were actually in this situation. The most interesting contrast was for the youngest children. Parents reported that they would rarely leave children under 8 alone, even for short times, yet in practice a group of parents did just that (V-3%; M-4%).

Although a number of parents leave their children to care for themselves, some expressed concern about this arrangement. Most parents who were interviewed in their homes had given serious thought to the situation. Some indicated they nervously awaited telephone calls from their children to ascertain that they were safely at home. Others said they received too many calls from their children, requesting arbitration in fights with siblings, and other decisions. Some children reported that they had been scared when home alone, others had skipped school and still others said they watched a lot of television. Certain children expressed boredom. Some older children did not like having responsibility for younger siblings.

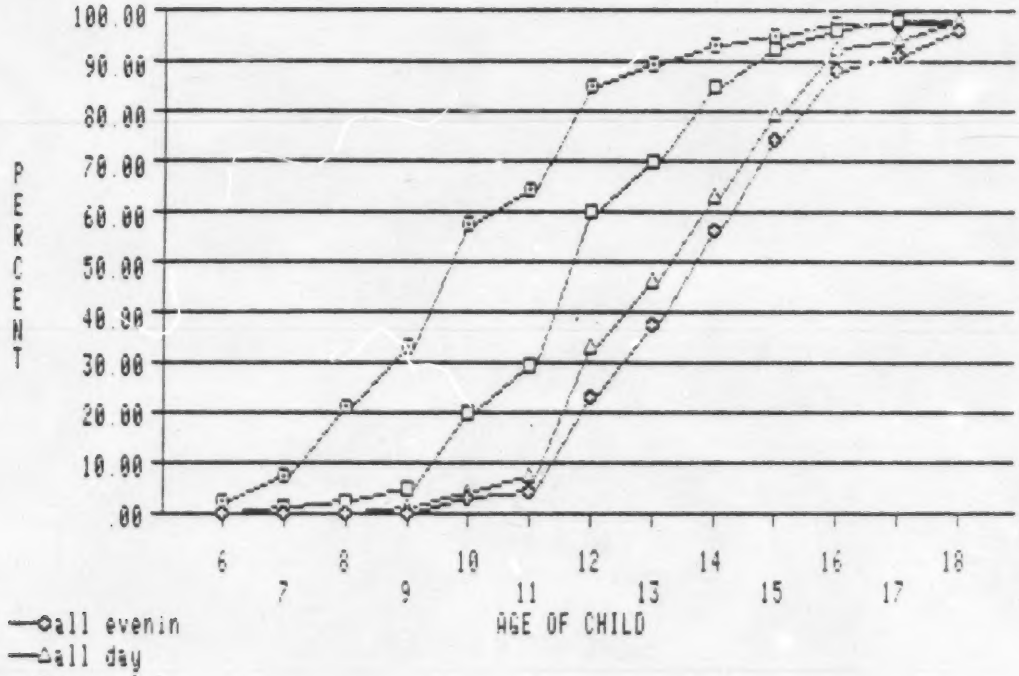
Almost all of the families using self/sibling care (V-90%; M-95%) reported that there were advantages to this arrangement. Noting that most of the children in self-care were more than 11 years old, increased

EXHIBIT G: AGE AT WHICH PARENTS WOULD FEEL COMFORTABLE LEAVING CHILDREN ALONE

VIRGINIA



MINNESOTA



independence for the child and having the child learn new survival skills were the two benefits most frequently mentioned by parents in both states. One Virginia single parent, however, a mother of two, reported that the resulting independence and survival skills were not viewed as a "benefit." She felt her daughters were growing up too fast as a result of self-care.

Few parents expressed dissatisfaction with self-care arrangements. The overwhelming majority of parents (V-86%; M-99%) said that this arrangement met their needs. More than half the parents who had children in self-care said that this arrangement allowed them to do things they would not otherwise be able to do. Work, specific household tasks, and free time for civic and recreational activities were frequently mentioned. Other benefits cited during the in-home interview were dating (for single parents), overtime work and educational pursuits.

While parents did not directly report dissatisfaction with self-care arrangements for their school-age children, more than half the families in Virginia and 46 percent in Minnesota did mention at least one worry. (See Exhibit H.) More parents worried about accidents than any other potential concern, and the largest percentage of problems that developed were related to accidents. Most of the parents' worries had not developed to the problem stage. Certain concerns which receive a lot of publicity--such as too much television, loneliness and sexual activities--accounted for 0 to 5 percent of reported worries/problems.

Most parents (V-89%; M-95%) had special instructions or ground rules for the time their school-age children spent without adult supervision. The more frequent rules related to stove/appliance restrictions; not letting anyone, including friends, in the house; housework and chores; restricted area for play; and regular check-in calls. More than one-quarter of the families would not let their children have anyone in the house when the parents were not at home; some of the children who were interviewed mentioned this as a drawback to the self-care situation.

EXHIBIT H: PARENT CONCERNS WHEN CHILDREN ARE WITHOUT ADULT SUPERVISION

	VIRGINIA		MINNESOTA	
Concern	Percentage Worried (Not Problem)	Percentage Problems (and Worry)	Percentage Worried (Not Problem)	Percentage Problems (and Worry)
Accidents	37	9	63	8
Juvenile deliquency/ peer group concerns	4	5	7	6
Too much TV	-	-	-	1
Nutritional concerns	-	-	3	-
Drugs	4	-	-	1
Alcohol	-	-	-	1
Sex exploration (with or by peers)	-	-	-	3
Sex exploitation with or (by adult/older child)	5	-	-	-
Homework neglected	-	6	-	10
School/grade problems	-	-	-	-
Truancy (cutting or skipping school)	-	1	1	-
Other problems in school	-	-	-	-
Loneliness	1	2	-	3
Boredom	2	-	1	3
Fear/axiety	14	-	4	-
Child feels unloved	-	-	-	-
Other emotional problems	-	1	-	-
Chores neglected	1	-	1	-
Fighting with siblings	1	3	8	4
Rule violation	2	4	8	4
Wear and tear on house	5	1	3	3
Fire	8	-	-	-
Intruders	15	3	-	-
Other	17	6	10	8

These percentages are based upon the 12[illegible] of the Virginia sample and the 11[illegible] of the Minnesota sample who responded to this item.

The first table entries should be interpreted as follows: Of the families in Virginia who use self/sibling care arrangements and who report having particular problems or worries, 37% worry about accidents, while another 9[illegible] have had a problem (as well as a worry) with accidents.

In summary, parents reported that they were satisfied with their self-care arrangements, but about half of them had worries associated with this situation. Many parents seemed to feel there were some positive effects for their children who were left without adult supervision. Self-care arrangements were most often found in single-adult households or in those in which both parents worked.

Likely Future Trends and Remaining Issues

Working parents' need for child care for their school-age children is an issue that is attracting widespread attention. Assuming that parents will continue to work of necessity or desire, what can be done to improve the care arrangements for their school-age children during nonschool hours?

Families with all adults working full-time outside the home and single-adult households reported difficulties with their school-age care arrangements more frequently than other types of families. A variety of ways of responding to the needs of these families is possible. Existing modes of care could be made more accessible. More age-appropriate programs might be developed in day care centers. Diverse forms of employer assistance in child care should be explored. Public school-based before-and-after school programs could be expanded in size and number. In this study special attention was devoted to these last two alternatives.

Employer Assistance in Child Care

The types of child care assistance employers have offered vary considerably, and have included alternate work schedules, sick child leave, administration of a child care program on or near the worksite, and purchase or subsidy of child care "slots" for employees with local providers. A new personnel benefit concept, known as the "cafeteria" plan, allows employees to choose the benefits they want from a range of

alternatives (substituting leave to take care of sick children, for example, in place of other "credits," such as health insurance, vacation, sick leave).*

Parents were asked whether particular types of child care assistance were offered by their (or their spouse's) employer, and if so, whether they used the assistance. The responses for both states showed nearly identical patterns of availability and usage. Flexible hours (usually on an informal basis) were offered and used more than any other type of support (V-22%; M-20%). Other types of assistance (such as information and referral, centers or family day care homes on or near the worksite, and acquiring day care "slots") were far less available, and were typically not used when offered. Possible reasons for not using available assistance could include: a nonworking spouse provided child care; parents had part-time work schedules; the care services arranged by the employer were inconvenient or unacceptable; and the hours of operation did not coincide with the nature of job responsibilities.

Most employer assistance programs are directed toward preschool children, whose care needs are for larger blocks of time. Flexible hours and leave policies may be more directly related to the care needs of families with school-age children.

Nearly all (V-95%; M-81%) of those who used some type of employer assistance indicated they were staying--or planned to stay--longer at the job because of that assistance. Roughly half (V-56%; M-50%) said that working was possible only with the available support. Employees using child care support available through their job perceived a strong

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* A separate ACYF study, the National Employer Supported Child Care Project, will provide information on all known employer supported child care programs and will develop "how to" materials for businesses interested in starting a child care program. Contact--Patricia Hawkins, Administration for Children, Youth and Families, for further information.

positive effect on their work performance and their interest in remaining with that employer. Many felt this support was critical if they were to work at all.

School-Based Programs

Northern Virginia is one of a growing number of areas nationwide that has experimented successfully with public school-based extended day programs. These programs are funded primarily through parent fees, with the balance provided by the local government. Minnesota (particularly in the Minneapolis-St. Paul metropolitan area) also has a growing number of day care programs in the public schools.

Parents who used this type of program tended to be very satisfied; as a group, more parents in both states felt their needs were extremely well met with this mode of care than any other. The most frequently mentioned benefits of these programs were parent involvement and educational activities for the children. School-based extended day programs offered parents and their school-age children a supervised care arrangement free of many transportation difficulties.

Some private sector providers did not like the competition offered by publicly-supported programs. (Others, it should be noted, cooperate by sharing staff and other resources.) Programming to meet the needs of both older and younger children seemed to be an almost universal concern with school-based care.